Agency Viasting gor Please type or print in ink. If you need This initial notification information is auditional space, use separate sheets of 103(c) of the Comprerequired by Silot paper Indicate the letter of the item herisive Er Jeor militaal Responsa Compensation, and that -3891.16 to Act nd must which applies. be maded by Jur = 5, 1981 1LS-000-001-019 Person Require: to Notify: ANACONDA METAL HOSE Enter the name and address of three person or organization reclaimed to notify O. BOX 39 Sugel 61938 MATTOON Site Location: ANACONDA METAL HOSE Name of Site Enter the common name (if knowen) and actual location of the site. E. RTE 16 ·61938 COLES MATTOON County 1LD005189527 Person to Contact; QUALITY CONTROL SUPVR. FRANK, BENSLEY, Name (Last, First and Title) Enter the name, tale (if applicables), and business telephone number of thee person-234-8844 (217)to contact regarding information submitted on this form. Dates of Waste Handling: Enter the years that you estimate waste 1968 1960 From (Year) To (Year) treatment, storage, or disposal began and ended at the site. Waste Type: Choose the option you prefer to complete Option I: Select general waste types and source categories. If Option 2: This option is available to persons familiar with the you do not know the general wassle types or sources, you are Resource Conservation and Recovery Act (RCRA) Section 3001 encouraged to describe the site im Item I-Description of Site. regulations (40 CFR Part 261). Source of Waste: Specific Type of Waste: General Type of Waste: EPA has assigned a four-digit number to each hazardous waste Place an X in the appropriate Place an X in the appropriate listed in the regulations under Section 3001 of RCRA. Enter the boxes. boxes. The categories listed appropriate four-digit number in the boxes provided. A copy of overlap. Check each applicable the list of hazardous wastes and codes can be obtained by category. contacting the EPA Region serving the State in which the site is located. 1
Mining 1.
Organics 2. Construction 2 | Inorganics 3. D Textiles 3. D Solvents 4.

Fertilizer 4. D Pesticides 5. D Paper/Printing B Heavy metals 6. D Leather Tanning 6. D Acids 7. D Iron/Steel Foundry 7: D Bases 8.

Chemical, General A ET PCBs 9. Mixed Municipal Waste 9. 10 Photogr/Polishing 10. 🛘 Unknown - ----10. D Military/Ammunition D Electrical Conductors 11. D Other (Specify) 12. 🗆 Transformers 🚬 💷 13. D Utility Companies 14.
Sanitary/Refuse 15 D Photolinish 16. D Lab/Hospital. 17 D Unknown -18. D Other (Specify):

N∈ tificati::on of Hazardous Waste Site

EPA Region 5 Records Ctr.
291121

Lorm Approved
OMB No. 2000 0138

	nutification, the signature is optional. Check the boxes which best describe the relationship to the site of the person required to notify if you are not required to notify check "Other"	Signatural / Jogan	Z D.M. 9/4/8/	Operator Past Other
<u>.</u>	(such as plant managers, superintendents, trustees or attorneys) of persons required to notify must sign the form and provide a mailing address (if different than address in item A). For other persons providing	Street P. O. BOX 39		Owner, Present Owner, Past Transporter Operator, Present
J	Signature and Title: The person or authorized representative	Name ANACONDA METAT I	iosr	, ,
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			•	•
	•	•	• .	
			•	
	any other information or comments which may help describe the site conditions.			
	the site and describe any nearby wells, springs, lakes, or housing. Include such information as how waste was disposed and where the waste came from Provide	•	•	
•	Describe the history and present conditions of the site. Give directions to			
	Description of Site: (Optional)			
	•	e.		
		·		
		<u>.</u>	-	
	·			
	publishing map showing the site location.	garantina di Kabupatèn Bandaran Kabupatèn Bandaran Kabupatèn Bandaran Kabupatèn Bandaran Kabupatèn Bandaran Ka Kabupatèn Bandaran B	·	•
	the site. Place an X on the map to indicate the site location. Draw an arrow showing the direction north. You may substitute a			
,,	Sketch a map showing streets, highways, routes or other prominent landmarks near	, 		
<u>—</u>	Sketch Map of Site Location: (Optional		aged to do so (
	Note: Items Hand Lare optional. Completing these items will assist EPA and State and local governments in locating and assessing hazardous waste sites. Although completing the items is not required, you are encouraged to do so			
_	Place an X in the appropriate boxes to indicate any known, suspected. Or likely releases of wastes to the environment.			
	Known, Suspected or Likely Releases to	9 Cither (Specify)	•	
	estimited area size which the facilities occupy using square feet or acres	7. Drums, Above Ground 8. Drums, Below Ground	acres	<u> </u>
	in the "total facility area" space, give the	6 D Underground Injection	square feet 500)
	give the estimated combined quantity (volume) of hazardous wastes at the site using cubic feet or gallons.	4 D Tanks 5 D Impoundment	Total Facility Area	. <
	In the "total facility waste amount" space	2 D Land Treatment 3 🛣 Landfill	ga-ions 2500) 6
	Place an X in the appropriate howes to indicate the facility types found at the site.	1 D Pries	cetar feet	
=	Waste Cluantity	Facility Type	Total Facility Waste A	maunt
	Notification of Hazardous Waste Site	Side Two		

IFR Noc. 81-11500 Filed 4-14-81, 8.45 am] BILLING CODE 6560-29-C